## Public Health Committee Public Hearing March 19, 2014

Testimony on Raised Bill 438
An Act Concerning Certification of Stroke Centers

Good afternoon Senator Gerratana, Representative Johnson and distinguished members of the Public Health Committee. My name is Dawn Beland. I live in Burlington, CT; I am a nurse and a member of the CT Stroke Coordinators group. Since 2001, I have been the Stroke Center Coordinator at Hartford Hospital, now a Joint Commission certified Comprehensive Stroke Center. I am honored to have your attention, and am here today to ask for your support for Senate Bill 438, An Act Concerning Certification of Stroke Centers.

Since 2001, the science regarding the care of patients with stroke and the available treatments for stroke has grown considerably. For example, it's not just the administration of thrombolytics or tPA to eligible patients that's required but doing so within 60 minutes of ED arrival is currently the standard of care. To do this and other appropriate treatments, hospitals need to be organized and ready to deliver care whenever a patient arrives. Recognition and pre-arrival notification by EMS has been shown to facilitate this care. Building a state-wide system of care for Connecticut that links EMS and stroke capable hospitals would help to ensure consistent delivery of appropriate therapies and standardized care.

Demonstrating their support of this concept, the Department of Public Health launched a voluntary statewide program to designate CT's acute care hospitals as Primary Stroke Centers in 2007. After implementation of this program, the DPH gathered over 85 health care providers and stroke experts from diverse settings in CT in a 10-month planning process. From this effort, the CT Comprehensive Plan for Stroke Prevention and Care was developed. The goal of this plan was two-fold.

- 1. To create a coordinated system of stroke care in which it was possible for every CT resident experiencing a stroke to have access to appropriate and timely care.
- 2. To develop a coordinated care system involving emergency medical services, hospital stroke teams with specific training in stroke care, specialized hospital stroke units, and standardized care protocols for the diagnosis and treatment of stroke.

The plan was published in 2009 and was to cover activities through 2013. This plan was well-received by the hospitals in CT. While many hospitals in the state sought Joint Commission Primary Stroke Center certification, the DPH program allowed additional acute care hospitals to implement a standardized stroke system of care at their facilities. Over the years, 23 hospitals went through the process to become CT DPH designated Primary Stroke Centers; some (16) did so in addition to Joint Commission certification. Some (7) never attempted either. Unfortunately, due to changes in federal funding, this program ended December 31, 2013. As

such, there is the potential for hospitals to lose the capacity to provide an approved, rapid, systematic approach to acute stroke evaluation, treatment and recovery care.

An efficient and effective system of stroke care is needed in all of our communities to order to provide current, evidence-based treatment for patients with stroke. There is a public health need to identify acute care hospitals in CT as designated Primary or Comprehensive Stroke Centers to ensure rapid triage, diagnostic evaluation and treatment of patients suffering a stroke.

We look forward to working with the Public Health Committee and other interested groups as we continue to develop and revise the language of the bill to create a plan that serves our communities well.

Thank you,

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A Joint Commission Comprehensive Stroke Center



